

Self-Esteem & Parent Relationships: A Guide

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Introduction to Self and Parental Attitudes

The study of attitudes toward the self and attitudes toward parents represents a cornerstone of developmental psychology and personality theory, offering profound insights into the architecture of the human psyche. These attitudes, which encompass cognitive evaluations, emotional responses, and behavioral inclinations, are inextricably linked, forming the bedrock upon which an individual constructs their sense of identity and negotiates the social world. A person's attitude toward the **self**, often conceptualized as self-esteem or self-worth, is largely a reflection of the perceived value and acceptance experienced during formative interactions with primary caregivers. Conversely, attitudes toward **parents** are complex emotional schema resulting from the internalization of caregiving experiences, authority structures, and modeled behaviors. Understanding the dynamic interplay between these two sets of core attitudes is essential for diagnosing psychological distress and fostering lifelong adjustment, as the initial relational template set within the family unit tends to color all subsequent relationships and self-perceptions.

The complexity of this interaction necessitates a nuanced approach, recognizing that the attitude toward the self is not merely a direct echo of parental appraisal, but rather a synthesized product mediated by the child's own temperament, cognitive capacities, and subsequent social experiences. However, the foundational influence remains undeniable; early parental feedback--whether critical or supportive, consistent or sporadic--establishes the initial criteria by which the child learns to judge their own capabilities and inherent worth. Furthermore, an individual's attitude toward their parents often shifts throughout the lifespan, moving from initial idealization in early childhood, through often necessary devaluation during adolescence, and potentially culminating in a more balanced, integrated view in adulthood. This developmental trajectory highlights that attitudes are not static constructs but are subject to continuous refinement and reconstruction, driven by maturational processes and evolving interpersonal demands, yet always tethered to the initial emotional blueprints laid down in infancy.

Psychological theories across various traditions, from psychodynamics to social learning, converge on the principle that the quality of the parent-child relationship serves as the primary mechanism for the transmission of self-regard. If parental attitudes are characterized by consistent warmth, clear boundaries, and appropriate autonomy support, the child is likely to develop a robust and positive attitude toward the self, characterized by high self-efficacy and resilience. Conversely, environments marked by neglect, harsh criticism, or conditional love often foster a self-attitude characterized by pervasive self-doubt, anxiety, and a tendency toward either externalizing or internalizing distress. Therefore, the investigation into attitudes toward self and parents is fundamentally an exploration of how external relational realities are transformed into **internal psychological realities**, shaping the very structure of personal meaning and emotional regulation.

Developmental Origins of Self-Concept

The formation of attitudes toward the self begins long before explicit self-awareness is achieved, rooted deeply in the patterns of interaction established during the first years of life. Attachment theory provides the most compelling framework for understanding these developmental origins, positing that the infant's primary attitude toward the self is derived directly from the perceived availability and responsiveness of the primary caregiver. When a parent consistently meets the infant's needs for comfort and security, the child develops a secure attachment style and, crucially, an internal working model that views the self as worthy of care and attention. This internal working model acts as a powerful cognitive filter, predisposing the individual toward a positive self-attitude and the expectation that others will also be responsive and supportive, thus promoting exploration and mastery of the environment. Conversely, inconsistent or rejecting care leads to insecure attachment styles (avoidant, ambivalent, or disorganized), which inherently incorporate a negative or confused attitude toward the self, often manifesting as feelings of inadequacy or hypervigilance regarding relational threats.

Beyond the establishment of basic attachment, the development of the self-concept is heavily influenced by the process of social referencing and early symbolic play. Between the ages of two and five, children begin to integrate specific verbal and non-verbal feedback from parents into their nascent self-schema. Parental narratives about the child's abilities ("You are so smart," or "You are always causing trouble") become internalized definitions, shaping the child's explicit attitudes about their competencies and character traits. This period marks the transition from a purely relational self-attitude to one that incorporates specific attributes. The child's growing linguistic capacity allows them to articulate and solidify these internalized parental judgments, often leading to the initial emergence of self-evaluative emotions such as pride and shame. The quality of parental feedback during this stage--specifically whether it focuses on effort (growth mindset) or fixed traits (fixed mindset)--critically determines whether the child develops an attitude toward the self characterized by learned helplessness or persistent self-efficacy.

Furthermore, the establishment of boundaries and the negotiation of autonomy play a critical role in shaping the self-attitude during the toddler and preschool years. Parents who allow for appropriate levels of exploration and risk-taking, while providing a safe base for return, foster an attitude of competence and independence. The child learns that they are capable of navigating challenges, leading to an attitude toward the self characterized by **self-reliance**. Conversely, overly intrusive or controlling parenting hinders the development of intrinsic motivation and can lead to a self-attitude defined by dependence and a fear of failure. The developmental task of separating the self from the parental unit, which intensifies during adolescence, is therefore fundamentally dependent on the success of these early developmental stages. A secure and positive self-attitude allows for a smoother, less conflictual separation, while a fragile self-concept often fuels intense, rebellious, or prolonged conflicts as the individual struggles to define

themselves outside of the internalized parental gaze.

The Role of Parenting Styles in Attitude Formation

Parenting styles, defined by the systematic pattern of parental behaviors and attitudes across two primary dimensions--demandingness (control) and responsiveness (warmth)--exert a profound and measurable influence on the development of children's attitudes toward both the self and their parents. Research pioneered by Diana Baumrind established four primary typologies, each correlating with distinct psychological outcomes. The **Authoritative** style, characterized by high demandingness coupled with high responsiveness, consistently yields the most positive outcomes. Children raised under this style typically develop positive attitudes toward the self, marked by high self-esteem, academic success, and strong social skills, because they experience consistent love alongside clear, rational boundaries. Their attitude toward their parents is usually characterized by respect and trust, viewing them as competent guides rather than arbitrary dictators.

In contrast, the **Authoritarian** style, defined by high demandingness and low responsiveness, often results in children developing conflicted attitudes. While these children may exhibit high levels of obedience due to fear of punishment, their attitude toward the self is frequently marked by anxiety, low self-worth, and difficulty in independent decision-making. Their attitude toward their parents tends to be a mix of compliance and underlying resentment, as the parent is perceived as controlling and emotionally distant. Similarly detrimental, though in a different manner, is the **Permissive** style (low demandingness, high responsiveness). Children from permissive environments often develop inflated or unrealistic attitudes toward the self, lacking necessary self-regulation skills and struggling with frustration tolerance when encountering external demands. Their attitude toward their parents, while affectionate, may lack genuine respect for boundaries, seeing the parent more as a resource or peer than an authoritative figure.

The fourth style, **Neglectful** or Uninvolved parenting (low demandingness, low responsiveness), is the most psychologically damaging. This lack of engagement conveys to the child that they are unimportant or unworthy of time and effort, leading to severely negative attitudes toward the self, often manifesting in profound feelings of worthlessness, emotional dysregulation, and high vulnerability to mental health disorders. The attitude toward parents in such cases is typically characterized by emotional distance, distrust, and often deep-seated anger or apathy. Furthermore, the concept of **Conditional Positive Regard**, where parental love and approval are contingent upon the child meeting specific performance standards or emotional needs of the parent, is particularly corrosive to self-attitude. This conditionality forces the child to adopt a 'false self' to maintain parental affection, resulting in an attitude toward the self that is fragile, inauthentic, and perpetually dependent on external validation, thus hindering the development of true self-acceptance.

Attitudinal Congruence and Discrepancy

The relationship between attitudes toward the self and attitudes toward parents is often characterized by varying degrees of congruence or discrepancy, which holds significant implications for psychological health. Congruence often arises through the mechanism of identification, where the child consciously or unconsciously adopts the values, behaviors, and self-appraisal standards of the parents, particularly the same-sex parent. If the parents possess a healthy, balanced attitude toward themselves (e.g., self-respect without grandiosity), and the child identifies with this model, a positive congruence is established. This leads to an internalized standard that views both the self and the parental figures positively, facilitating smooth psychosocial functioning and continuity of values across generations. This process is heavily mediated by the child's perception of the parent's actual self-attitude; children whose parents exhibit strong self-efficacy are more likely to internalize the belief that they too are capable of mastery.

However, significant **attitudinal discrepancy** can occur, particularly during adolescence or when parental attitudes are deeply maladaptive. Discrepancy arises when an individual develops a positive attitude toward the self (e.g., high self-efficacy, positive goals) but holds a negative attitude toward their parents (e.g., viewing them as incompetent, morally compromised, or emotionally abusive). This necessary divergence can be a sign of healthy psychological differentiation and maturation, allowing the individual to shed negative internalized messages and forge an independent, healthier identity. Conversely, discrepancy can also occur when an individual maintains a highly idealized, positive attitude toward parents despite experiencing neglect or abuse (often seen in trauma bonding), while holding a deeply negative attitude toward the self. This configuration is highly problematic, as the individual internalizes the abuse as their own fault, protecting the idealized parental image at the expense of their self-worth, a common feature in complex trauma presentations.

The resolution of attitudinal discrepancy requires significant cognitive and emotional labor. When the discrepancy involves rejecting negative parental attitudes, the individual must navigate the psychological tension associated with violating internalized loyalty demands, often leading to feelings of guilt or anxiety. Social Learning Theory emphasizes that the individual must actively seek out alternative, positive role models or reference groups to replace the internalized negative parental schema, thereby validating their developing positive self-attitude. The successful resolution of discrepancy--moving toward a self-attitude that is separate and healthier than the parental model--is a key marker of successful individuation. Failure to resolve this discrepancy often results in chronic cognitive dissonance, where the individual is perpetually torn between their own emerging needs and the deeply ingrained emotional allegiance to the parental figures, leading to difficulties in establishing stable intimate relationships.

Psychodynamic Perspectives on Internalized Parental Figures

Psychodynamic theory offers a profound depth of analysis regarding attitudes toward self and parents, focusing on the internalization of parental figures as psychic structures. Sigmund Freud introduced the concept of the **Superego**, which represents the moral compass and the internalized voice of parental prohibition and societal standards. The Superego is largely formed through identification with the parents during the resolution of the Oedipus complex, embodying both the ideal standards and the punitive sanctions imposed by the external world. A harsh or overly critical parental attitude translates into a similarly harsh and punitive Superego, resulting in a self-attitude characterized by chronic guilt, self-criticism, and feelings of unworthiness. Conversely, a weak or absent parental structure can result in a deficient Superego, leading to difficulties in moral regulation and empathy.

Building upon Freudian concepts, Object Relations Theory (ORT) provides a more detailed map of how early relational experiences are internalized as "objects," which are mental representations of the self in relation to others. Theorists like Melanie Klein and D.W. Winnicott emphasized that the earliest self-attitudes are formed through the splitting of internalized parental figures into "good objects" (the nurturing, responsive parent) and "bad objects" (the frustrating, absent parent). The infant's primary task is to integrate these split objects into a cohesive, whole representation, recognizing that the parent (and subsequently the self) contains both positive and negative qualities. A successful integration leads to a capacity for ambivalence and a stable self-attitude. However, failure to integrate, often seen in borderline pathology, results in an unstable self-attitude that alternates between idealization and devaluation, echoing the split internalized parental objects.

Winnicott's concept of the **"Good Enough Mother"** highlights the crucial role of parental imperfection in fostering a robust self-attitude. A parent who is reliably present but allows for necessary moments of frustration teaches the child that the self can survive disappointment and that the parental figure is realistic, not idealized. This allows the child to develop a "True Self"--an authentic core attitude rooted in spontaneous expression and genuine needs--as opposed to a "False Self," which is constructed to comply with parental demands. Therefore, from the psychodynamic perspective, attitudes toward the self and parents are not merely opinions, but are fundamental structural components of the personality, dictating the nature of unconscious conflict and the capacity for self-acceptance. Therapy in this tradition often focuses on accessing and modifying these internalized object relations to alleviate self-criticism and foster a more compassionate self-attitude.

Cognitive and Social Learning Influences

The cognitive and social learning traditions offer complementary explanations for the formation and maintenance of attitudes toward the self and parents, shifting the focus from unconscious drives to

observable behaviors, learned beliefs, and cognitive appraisals. Albert Bandura's Social Learning Theory posits that children acquire attitudes primarily through **observational learning** and modeling. Children observe their parents' attitudes toward themselves (e.g., how they handle failure, how they express confidence) and toward others, internalizing these observed behaviors as potential scripts for their own conduct. A parent who models resilient behavior and attributes failure to lack of effort rather than lack of ability transmits a powerful attitude of self-efficacy to the child. The child learns not only what to believe about the world but, critically, what to believe about their own ability to influence that world, forming the core of their attitude toward the self.

Cognitive theory further emphasizes the role of parental attributional styles. Parents who consistently attribute their child's failures to internal, stable factors (e.g., "You failed because you are unintelligent") foster a pessimistic explanatory style in the child, leading to a negative self-attitude characterized by learned helplessness. Conversely, parents who promote external, unstable attributions for failure ("You failed because you didn't study enough this time") encourage an optimistic self-attitude, viewing setbacks as temporary and controllable. These learned cognitive biases form the basis of the child's self-schema, acting as filters through which all subsequent self-relevant information is processed. The attitude toward the self is thus viewed as a collection of structured beliefs that dictate emotional responses and behavioral choices, and these beliefs are primarily inherited via parental communication patterns.

Furthermore, social comparison processes are mediated by parental values. As children enter school and peer groups, their self-attitude is increasingly influenced by comparing themselves to others. However, the parents often dictate the standards and the reference groups against which these comparisons are made. For example, parents who highly value academic achievement may inadvertently foster a self-attitude characterized by perpetual inadequacy if the child struggles to meet those high standards, regardless of success in other domains. The attitude toward parents, in this context, is influenced by the degree to which the child perceives parental values to align with or conflict with the broader social environment and their own emerging interests. If parental values are seen as rigid or irrelevant, the attitude toward parents may become critical, often leading to a defensive shift in the self-attitude aimed at protecting personal autonomy and identity separate from the family unit.

Impact of Attitudes on Psychological Adjustment

The established attitudes toward the self and parents are powerful predictors of psychological adjustment across the lifespan. A positive, stable attitude toward the self--high self-esteem combined with realistic self-appraisal--is strongly correlated with resilience, academic achievement, successful career navigation, and overall life satisfaction. Individuals with positive self-attitudes are better equipped to handle stress, recover from setbacks, and maintain motivation because their internal working model confirms their inherent worth and capability. Conversely, negative self-

attitudes are central features in nearly all forms of psychopathology. Low self-esteem is highly predictive of depression, anxiety disorders, eating disorders, and substance abuse, as the individual seeks external mechanisms to compensate for or numb the internalized feelings of inadequacy and self-contempt derived from negative early relational experiences.

The quality of the attitude toward parents also significantly impacts adjustment, particularly in the realm of interpersonal relationships. Individuals who successfully navigated the process of individuation and hold a balanced, non-idealizing attitude toward their parents are better able to form mature, egalitarian relationships with peers and partners. They understand that relationships are complex and imperfect, reflecting their internalized view of their parents as complex, imperfect people. Conversely, an overly negative attitude toward parents (e.g., chronic resentment or hostility) can lead to difficulties trusting others, projecting parental flaws onto partners, or engaging in repetitive patterns of conflict. Similarly, an overly positive, idealized attitude toward parents often leads to relationship difficulties stemming from unrealistic expectations of partners, or a tendency toward co-dependency where the individual seeks to perpetually please others to gain the external validation denied by internalized parental standards.

Maladaptive attitudes often manifest in specific behavioral patterns. For example, individuals who developed a narcissistic self-attitude often experienced conditional parental regard tied to performance or external success, leading them to develop an outward sense of grandiosity that masks a fragile, insecure core. Their attitude toward their parents might be idealized or dismissive, depending on whether the parents continue to supply the necessary validation. In contrast, individuals characterized by chronic self-punishment and self-sabotage often reveal a deeply internalized attitude toward parents that is highly critical and demanding, reflecting the harsh Superego formed early in life. Effective psychological adjustment thus depends not merely on having a positive self-view, but on possessing a self-attitude that is authentic, integrated, and supported by a realistic and differentiated attitude toward the primary figures of authority and care.

Therapeutic Implications and Future Research Directions

Therapeutic interventions targeting issues related to attitudes toward self and parents are central to nearly all forms of psychotherapy. Cognitive Behavioral Therapy (CBT) focuses directly on modifying the cognitive components of these attitudes, specifically identifying and challenging the negative automatic thoughts and core beliefs (e.g., "I am unlovable," derived from parental criticism) that fuel negative self-regard. By restructuring these maladaptive self-schemas and attributional styles, CBT aims to replace negative attitudes with more balanced, evidence-based self-appraisals. Psychodynamic and Object Relations therapies, conversely, focus on the deeper emotional roots, helping the patient recognize and differentiate from the internalized "bad objects" or punitive Superego structures, facilitating the integration of split parental images and fostering genuine self-compassion by separating the adult self from childhood relational trauma.

A key therapeutic goal is **differentiation**--the process of achieving a clear sense of self while maintaining emotional connection with the family of origin, without being fused with or reactive to their emotional system. This involves helping the client develop an attitude toward their parents that is based on adult reality rather than childhood necessity, often through mourning the loss of the idealized parent and accepting the limitations of the real parent. Successful therapy enables the individual to hold a positive attitude toward the self that is internally generated and independent of parental approval or disapproval, thus shifting the locus of evaluation from external (parental) to internal (self-validated) criteria. This shift is crucial for long-term psychological stability and the capacity for autonomous decision-making.

Future research in this area should focus on several emerging directions. Firstly, neurobiological research is increasingly exploring the neural correlates of internalized parental attitudes, examining how early attachment experiences shape prefrontal cortex function and emotional regulation pathways. Secondly, cross-cultural psychology needs to further investigate how cultural norms regarding filial piety, individualism, and collectivism modify the relationship between attitudes toward the self and parents, as the psychological meaning of differentiation varies significantly across societies. Finally, longitudinal studies must continue tracking the stability of these core attitudes from childhood through late adulthood, specifically examining how major life transitions (e.g., becoming a parent, parental death) necessitate the restructuring of both the self-attitude and the attitude held toward the parents, providing a comprehensive understanding of the lifelong development and maintenance of these fundamental psychological constructs.